

CJA 23

FINANCIAL AFFIDAVIT

Rev. 5/98

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES ☐ MAGISTRATE ☐ DISTRICT ☐ APPEALS COURT or ☐ OTHER PANEL (Specify below)

IN THE CASE

_____ V.S. _____

FOR _____

AT _____

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

➡ _____

CHARGE/OFFENSE (describe if applicable & check box →) ☐ Felony ☐ Misdemeanor

- | | | |
|---|--------------------------|----------------------|
| 1 | <input type="checkbox"/> | Defendant-Adult |
| 2 | <input type="checkbox"/> | Defendant - Juvenile |
| 3 | <input type="checkbox"/> | Appellant |
| 4 | <input type="checkbox"/> | Probation Violator |
| 5 | <input type="checkbox"/> | Parole Violator |
| 6 | <input type="checkbox"/> | Habeas Petitioner |
| 7 | <input type="checkbox"/> | 2255 Petitioner |
| 8 | <input type="checkbox"/> | Material Witness |
| 9 | <input type="checkbox"/> | Other _____ |

DOCKET NUMBERS
Magistrate
District Court
Court of Appeals

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

ASSETS	EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Am Self-Employed			
		Name and address of employer: _____			
		IF YES, how much do you earn per month? \$ _____	IF NO, give month and year of last employment _____ How much did you earn per month? \$ _____		
		If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____			
OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No				
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES	RECEIVED	SOURCES		
		\$ _____	_____		
CASH	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ _____				
	PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	IF YES, GIVE THE VALUE AND DESCRIBE IT	VALUE	DESCRIPTION		
		\$ _____	_____		
		\$ _____	_____		
		\$ _____	_____		
OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents _____	List persons you actually support and your relationship to them _____ _____ _____ _____	
	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME:	Creditors	Total Debt	
					Monthly Paymt.
				\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____	
		\$ _____	\$ _____	\$ _____	
		\$ _____	\$ _____	\$ _____	

I certify under penalty of perjury that the foregoing is true and correct.

Executed on (date)

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)
